UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2002
Estimated average burden hours per response... 1



FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

SEC USE ONLY
Prefix Serial

DATE RECEIVED

UNIFORM LIMITED OFFERING EXEMPTION \$27,200 13398

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Kern Headland, LLC offering of up to \$2,010,000 in Class A Units of membership interests Filing Under (Check box(es) that [] Rule 504 [] Rule 505 [x] Rule 506 [] Section 4(6) apply): Type of Filing: [x] New Filing [] Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) Kern Headland, LLC Address of Executive Offices (Number and Street, City, State, Telephone Number (Including Area Zip Code) Code) 300 Main St., Cincinnati, OH 45202 (513) 241-8716 Address of Principal Business Operations (Number and Street, Telephone Number (Including Area City, State, Zip Code) (if different from Executive Offices) Code) **Brief Description of Business** Investment in debt and equity securities of Headland Acquisition, LLC, a Delaware limited liability company

| Type of Business Organization | | |
|------------------------------------|---|---------------------------------|
| [] corporation | [] limited partnership, already formed | [x] other (please specify): |
| [] business trust | [] limited partnership, to be formed | Limited liability company |
| | Month Year | |
| Actual or Estimated Date of Inco | orporation or Organization: [0]9][0] | 5] [x] Actual [] Estimated |
| Jurisdiction of Incorporation or C | Organization: (Enter two-letter U.S. Postal | Service abbreviation for State: |

CN for Canada; FN for other foreign jurisdiction) [O][H]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

| Check Box(es) that Apply: | [x] Promoter [] | Beneficial Owner | [x] Executive Officer | [x] D | irector [|] General and/o Managing Partner |
|---|-------------------------|---------------------|--|---------|--|--|
| Full Name (Last nam Kern, John C., Jr. | ne first, if individual |) | | | | |
| Business or Resider 300 Main St., Cincin | | per and Stree | t, City, State, Zip Code | e) | | |
| Check Box(es) that Apply: | [] Promoter [] | Beneficial Owner | [] Executive Officer | [] Dii | rector [] | General and/or Managing Partner |
| Full Name (Last nam | ne first, if individual | () | | | | |
| Business or Resider | nce Address (Numl | ber and Stree | t, City, State, Zip Code | e) | | |
| Check Box(es) that Apply: | [] Promoter [] | Beneficial Owner | [] Executive Officer | [] Dii | rector [] | General and/or Managing Partner |
| Full Name (Last nam | ne first, if individua | 1) | Name and the state of the state | | Tangan and the second s | |
| Business or Resider | nce Address (Numl | ber and Stree | t, City, State, Zip Cod | e) | | |
| Check Box(es) that Apply: | [] Promoter [] | Beneficial Owner | [] Executive Officer | [] Dii | rector [] | General and/or Managing Partner |
| Full Name (Last nam | ne first, if individua | 1) | | | · | |
| Business or Resider | nce Address (Num | ber and Stree | et, City, State, Zip Cod | e) | | |
| Check Box(es) that Apply: | [] Promoter [] | Beneficial Owner | [] Executive Officer | [] Dir | rector [] | General and/or Managing Partner |
| Full Name (Last nam | ne first, if individua | 1) | | | | |
| Business or Resider | nce Address (Numi | ber and Stree | t, City, State, Zip Cod | e) | | |
| Check Box(es) that Apply: | [] Promoter [] | Beneficial Owner | [] Executive Officer | [] Di | rector [] | General and/or Managing Partner |
| Full Name (Last nam | ne first, if individua | l) | | | | |
| Business or Resider | nce Address (Num | ber and Stree | et, City, State, Zip Cod | e) | | |
| | | | | | | |

| Check Apply: | Box(es |) that | [] Pron | noter [|] Benefic Owner | | [] Exe Office | | []D | irector [|] Gener Manag Partne | |
|-----------------------------|--------------------------------------|------------------------------------|-------------------------------------|----------------------------------|--------------------------------------|-----------------------------------|--------------------|------------------------------------|--|-------------|----------------------------|-----------------|
| Full N | ame (La | st name | first, if i | ndividua | al) | V | | | | | | |
| Busine | ess or R | esidenc | e Addre | ss (Num | ber and | Street, 0 | City, Stat | e, Zip Co | ode) | | | |
| | (Use | blank | sheet, o | r copy | and use | additio | nal copi | es of thi | s sheet, | as nece | ssary.) | |
| | | | | B. IN | FORMA | TION A | BOUT O | FFERING | 3 | | | |
| | s the issu | uer sold | , or does | the iss | uer inten | d to sell | , to non-a | accredite | d investo | ors in this | \$ | Yes No |
| | | | Answ | er also | in Apper | ndix, Col | umn 2, if | filing un | der ULO | E. | | |
| 2. Wh | at is the | minimu | m invest | ment th | at will be | accepte | ed from a | ıny indivi | dual? | | | \$ <u>1,000</u> |
| 3. Doe | es the of | fering p | ermit joir | nt owner | ship of a | single ι | unit? | | | | | Yes No |
| with sa broker or dea | ales of s r or deal aler. If m | ecurities er regist ore thar | s in the d ered with five (5) | offering. h the SI persons | If a pers EC and/c s to be lis | on to be or with a sted are | listed is state or | an asso states, lis ed perso | urchaser ciated pe st the nar ns of suc | rson or a | agent of a broker | a |
| Full N None | ame (La | st name | e first, if i | ndividua | al) | | | | | | | |
| Busin | ess or R | esidenc | e Addre | ss (Num | ber and | Street, (| City, Stat | e, Zip Co | ode) | | | |
| Name | of Asso | ciated E | Broker or | Dealer | | | | | | | | |
| States | in Whic | h Perso | n Listed | Has Sc | licited o | Intends | to Solic | it Purcha | sers | | | |
| (Chec | k "All | States" | or chec | k indiv | idual St | ates) | | · . | | [|] All S | tates |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [C1] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [\7] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |
| Full N | ame (La | st name | e first, if i | ndividua | al) | | | | | | | |
| Busin | ess or R | esidenc | e Addre | ss (Num | ber and | Street, (| City, Stat | e, Zip Co | ode) | | | |
| Name | of Asso | ciated E | Broker or | Dealer | | | | | | | | |
| | | | | | | | to Solic | it Purcha | sers | [|] All S | tates |

| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
|------|------|------|------|------|------|------|------|------|------|------|------|------|
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [MM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |
| | | | | | | | | | | | | |

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All States [FL] [AL] [AK] [AZ] [AR] [CA] [CO] [CT][DE] [DC] [GA] [HI] [ID] [IN] [IA] [LA] [IL] [KS] [KY] [ME][MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [HN] [NJ] [MM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [XT] [UT] M [VA] [WA] [WV] MI [WY] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

| Type of Security | Aggregate Offering Price | Amount Already Sold |
|---|-----------------------------|------------------------|
| Debt | \$ <u>None</u> | \$ <u>-0-</u> |
| Equity | \$None | \$0 |
| [] Common [] Preferred | | |
| Convertible Securities (including warrants) | \$ <u>None</u> | \$ <u>-0-</u> |
| Partnership Interests | \$ <u>None</u> | \$0 |
| Other (Specify limited liability company interests). | \$ <u>2,010,000</u> | \$ <u>-0-</u> |
| Total | \$ <u>2,010,000</u> | \$ <u>-0-</u> |
| | | |

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar

Answer also in Appendix, Column 3, if filing under ULOE.

amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Einter "0" if answer is "none" or "zero."

| | Number Investors | Dollar Amount of Purchases |
|--|---------------------|----------------------------|
| Accredited Investors | 0 | \$ <u>-0-</u> |
| Non-accredited Investors | <u> </u> | \$0 |
| Total (for filings under Rule 504 only) | | _\$ |
| Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. | | |
| Type of offering | Type of Security | Dollar Amount Sold |
| Rule 505 | NA | \$ |
| Regulation A | NA | \$ |
| Rule 504 | NA | \$ |
| Total | NA | \$ |
| 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | |
| Transfer Agent's Fees | |] \$ |
| Printing and Engraving Costs | | \$ |
| Legal Fees | |] \$ <u>5,000</u> |
| Accounting Fees | [] | \$ |
| Engineering Fees | • |] \$ |
| Sales Commissions (specify finders' fees separately) | [] | \$ |
| Other Expenses (identify) Filing fees, Due Diligence Costs | [x |] \$ <u>5,000</u> |
| Total | [× |] \$10,000 |
| b. Enter the difference between the aggregate offering price given in resp C - Question 1 and total expenses furnished in response to Part C - Que difference is the "adjusted gross proceeds to the issuer." | | \$ <u>2,000,000</u> |

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

| | Directors, & | Payments To Others |
|--|------------------|--------------------------|
| Salaries and fees | [] \$ | [] \$ |
| Purchase of real estate | | [] \$ |
| Purchase, rental or leasing and installation of machinery and equipment | [] \$ | [] \$ |
| Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) | [] \$ | [] \$ |
| Repayment of indebtedness | | [] \$ |
| Working capital | [] | [] \$ |
| Other (specify): Purchase of debt and equity securities | | [] \$ |
| of Headland Acquisition, LLC | | [] |
| Column Totals | [] | [] |
| Total Payments Listed (column totals added) | [x]\$ <u>2,0</u> | 00,000 |

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

| Issuer (Print or Type) | Signature | Date |
|--------------------------------|-----------------------------------|----------|
| Kern Headland, LLC | Jan. | 9/22/05 |
| Name of Signer (Print or Type) | Title of Signer (Print of Manager | r Тур́е) |
| John C. Kern, Jr. | | |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?

.....

Yes No

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| Issuer (Print or Type) | Signature | Date |
|--------------------------------|-----------------------|---------|
| Kern Headland, LLC | 6/11/1/1/1 | 9/22/05 |
| Name of Signer (Print or Type) | Title (Print or Type) | |
| | Manager | |
| John C. Kern, Jr. | | |